

## **APPLICATION DATA SHEET**

### **Application Information**

<b>Application Number::</b>	Not Yet Assigned
<b>Filing Date::</b>	February 9, 2004
<b>Application Type::</b>	Regular
<b>Subject Matter::</b>	Utility
<b>Suggested Classification::</b>	
<b>Suggested Group Art Unit::</b>	
<b>CD-ROM or CD-R?::</b>	
<b>Number of CD Disks::</b>	
<b>Number of Copies of CDs::</b>	
<b>Sequence Submission?::</b>	Yes
<b>Computer Readable Form (CFR)?::</b>	
<b>Number of Copies of CFR::</b>	
<b>Title::</b>	METHODS AND COMPOSITIONS FOR DETECTING AND TREATING RETINAL DISEASES
<b>Attorney Docket Number::</b>	39532-192229
<b>Request for Early Publication?::</b>	
<b>Request for Non-Publication?::</b>	
<b>Suggested Drawing Figure::</b>	
<b>Total Drawing Sheets::</b>	
<b>Small Entity?::</b>	Yes
<b>Latin Name::</b>	
<b>Variety Denomination Name::</b>	
<b>Petition Included?::</b>	
<b>Petition Type::</b>	
<b>Licensed US Govt. Agency::</b>	
<b>Contract or Grant Numbers::</b>	
<b>Secrecy Order in Parent Appl.::</b>	

## **Applicant Information**

**Applicant Authority Type::** Inventor  
**Primary Citizenship::** United States  
**Country::** U.S.A.  
**Status::** Full Capacity  
**Given Name::** George  
**Middle Name::**  
**Family Name::** INANA  
**Name Suffix::**  
**City of Residence::**  
**State or Province of Residence::**  
**Country of Residence::**  
**Street of Mailing Address::** 6500 SW 133 Drive  
**City of Mailing Address::** Miami  
**State or Province of Mailing Address::** Florida  
**Country of Mailing Address::** U.S.A.  
**Postal or Zip Code of Mailing Address::** 33156

**Applicant Authority Type::** Inventor  
**Primary Citizenship::** Canada  
**Country::** U.S.A.  
**Status::** Full Capacity  
**Given Name::** Margaret  
**Middle Name::** J.  
**Family Name::** McLaren  
**Name Suffix::**  
**City of Residence::**  
**State or Province of Residence::**  
**Country of Residence::**  
**Street of Mailing Address::** 6500 SW 133 Drive

<b>City of Mailing Address::</b>	Miami
<b>State or Province of Mailing Address::</b>	Florida
<b>Country of Mailing Address::</b>	U.S.A.
<b>Postal or Zip Code of Mailing Address::</b>	33156

### **Correspondence Information**

<b>Correspondence Customer Number::</b>	26694
<b>Phone Number::</b>	(202) 344-4651
<b>Fax Number::</b>	(202) 344-8000
<b>E-Mail Address::</b>	ashobbs@venable.com

### **Representative Information**

<b>Representative Customer Number::</b>	26694
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